



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Kiichi Ihara
Serial No. : 09/844,112
Filed : April 27, 2001
For : SIGNAL TRANSMISSION METHOD AND SIGNAL TRANSMISSION APPARATUS
Examiner : Parsons, Charles E.
Art Unit : 2613

745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

| (1) | (2) Claims remaining after amendment | (3) | (4) Highest number previously paid for | (5) Present extra | (6) Rate | (7) Additional Fee |
|---|---|-------|---|----------------------|-------------|-----------------------|
| Total claims | 28 | Minus | ** =28 | * 0 x | \$50 (25) | = \$ 0 |
| Independent claims | 6 | Minus | *** =6 | * 0 x | \$200 (100) | = \$ 0 |
| Total additional fee for this amendment | | | | | | \$ 0 |

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the _____ month following the expiration of the term originally set therefor. This is a petition to request a _____ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$_____ is attached, which covers the cost of ☐ additional claims _____ petition for extension of time.
- ☐ Charge \$_____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on February 17, 2005.

Thomas F. Presson, Reg. No. 41,442

Name of Applicant, Assignee or Registered Representative

Thomas F. Presson
Signature

February 17, 2005

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicant

By:

Thomas F. Presson

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